



Division of Laboratory Services
630 Hart Lane
Nashville, TN 37216
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

Disease/Agent Suspected or Test Requested:

Hepatitis C virus

Provider Requirements	
Acceptable Specimen Sources/Type(s) for Submission	<ul style="list-style-type: none">• Whole, clotted blood• Serum• Serum Separator Tube• EDTA
TDH Requisition Form Number	PH-4182
Media Requirements	<ul style="list-style-type: none">• Red-stoppered vacuum tube (whole blood)• Sterile, plastic screw capped vial (serum)
Special Instructions	
Shipping Instructions	<ul style="list-style-type: none">• Cold on cold packs-preferred• Ambient/Room Temperature
Laboratory Section Performing Testing	Serology
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).